

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004


PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME: BETA OFFSHORE PLATFORM ELLY - CAG280000
ADDRESS: 111 West Ocean Blvd., Suite 1240
 LONG BEACH, CA 90802
FACILITY: PLATFORM ELLY
LOCATION: LAT 33 35 .25 LO 118 07 37.52
 PACIFIC OCEAN, CA 90802
 ATTN: Marina Robertson

CAG001148	002A-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
08/01/2016	08/31/2016

DMR Mailing ZIP CODE: 90802
 MINOR (SUBR FV)
 Produced Water Monthly
 External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION			UNITS	NO. OF ANALYSIS	FREQUENCY	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE				
Oil and grease, hexane extr method	SAMPLE MEASUREMENT	*****	*****	*****	*****	15.300	15.300	mg/L	1*	Weekly	Grab
00552 1 0	PERMIT REQUIREMENT	*****	*****	*****	*****	29	42	MO AVG DAILY MX		Weekly	GRAB
Effluent Gross	SAMPLE MEASUREMENT	197	*****	bb/d	*****			*****	0	Daily	Estima
82600 1 0	PERMIT REQUIREMENT	Req. Mon. MO AVG	*****	bb/d	*****			*****		Daily	ESTIMA
Effluent Gross	SAMPLE MEASUREMENT	*****	197	bb/yr	*****			*****	0	Annual	Calcd
Produced water, flow	PERMIT REQUIREMENT	*****	10950000	bb/yr	*****			*****		Annual	CALCTD
82600 0 0	See Comments										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
Bruce Berwager				(562) 628 1526	10 24 2016
Executive Vice President, Chief Operating Officer				AREA Code	NUMBER
*****					MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

1. WTCWF, Deck Drainage, Domestic Waste & Fire Control Water are commingled with production & processed at platform Elly.
2. Produced water annual cumulative flow from March 1st thru Feb 28th each year.
3. Oil and grease sampling is weekly during discharge (no sample during weeks with no produced water discharges).

* Refer to cover letter.